## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

**Application or Docket Number** 

SUN19298

| CLAIMS AS FILED - PART<br>(Column 1)         |   |   |                                   |                       | (Column 2)          |                                      |            | SMALL ENTITY TYPE                     |                        | OR        | OTHER THAN OR SMALL ENTITY              |                        |
|--|---|---|-----------------------------------|-----------------------|---------------------|--------------------------------------|------------|---------------------------------------|------------------------|-----------|---|------------------------|
| TOTAL CLAIMS                                 |   |   | 12                                |                       |                     |                                      | 1          | RATE                                  | FEE                    |           | RATE                                    | FEE                    |
| FOR  |   |   | NUMBER FILED                      |                       | NUMB                | ER EXTRA                             |            | BASIC FEE                             | 355.00                 | OR        | BASIC FEE                               | 710.00                 |
| TOTAL CHARGEABLE CLAIMS                      |   |   | / 2 minus 20=                     |                       | · Ø                 |                                      |            | X\$ 9=                                |                        | OR        | X\$18=                                  |                        |
| INDEPENDENT CLAIMS                           |   |   | Z minus 3 =                       |                       | Ø                   |                                      |            | X40=                                  |                        | OR        | X80=                                    |                        |
| MU   | LTIPLE DEPEN  | DENT CLAIM P  | RESENT                            | ESENT                 |                     |                                      |            | +135=                                 |                        | OR        | +270=                                   | ,                      |
| * If the difference in column 1 is less that |   |   |                                   | ero, enter            | r "0" in c          | olumn 2                              |            | TOTAL                                 |                        | OR        | TOTAL                                   | 7/0                    |
| CLAIMS AS AMENDED -                          |   |   |                                   |                       |                     |                                      |            | SMALL ENTITY                          |                        |           | OTHER THAN SMALL ENTITY                 |                        |
|  |   | (Column 1)<br>CLAIMS  |                                   | HIGH                  |                     | (Column 3)                           | 1 r        | OMALL                                 | ADDI-                  | or<br>I I | OMALL                                   | ADDI-                  |
| AMENDMENT A                                  |   | REMAINING<br>AFTER<br>AMENDMENT                                 |                                   | NUM<br>PREVIO<br>PAID | OUSLY               | PRESENT<br>EXTRA                     |            | RATE                                  | TIONAL<br>FEE          |           | RATE                                    | TIONAL                 |
|  | Total   | *   | Minus                             | **                    |                     | =                                    |            | X\$ 9=                                |                        | OR        | X\$18=                                  |                        |
|  | Ind pendent   | *<br>NTATION OF MI  | Minus                             | ***                   | T.CLAIM             | =                                    | lacksquare | X40=                                  |                        | OR        | X80=                                    |                        |
|  | FINOT FRESE   | INTATION OF IVI   | ·                                 | PENDEN                | CLAIM               |                                      | <b>,</b> [ | +135=                                 |                        | OR        | +270=                                   |                        |
| •  |   |   |                                   |                       |                     |                                      |            | TOTAL<br>ADDIT. FEE                   |                        | OR        | TOTAL<br>ADDIT. FEE                     |                        |
|  |   | (Column 1)  |                                   | (Colu                 | mn 2)               | (Column 3)                           |            | 100m. r cc                            |                        |           | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                        |
| AMENDMENT B                                  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                       |                                   | HIGH<br>NUM<br>PREVIO | IEST<br>IBER        | PRESENT<br>EXTRA                     |            | RATE                                  | ADDI-<br>TIONAL<br>FEE |           | RATE                                    | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus                             | **                    |                     | =                                    |            | X\$ 9=                                |                        | OR        | X\$18=                                  |                        |
|  | Independent   | *   | Minus                             | ***                   |                     | =                                    |            | X40=                                  |                        | OR        | X80=                                    |                        |
|  | FIRST PRESE   | NTATION OF MI   | ULTIPLE DEI                       | PENDENT               | CLAIM               |                                      | J          | +135=                                 |                        | OR        | +270=                                   |                        |
|  |   |   |                                   |                       |                     |                                      | ı          | TOTAL                                 |                        |           | TOTAL                                   |                        |
|  |   |   |                                   |                       | -1                  |                                      |            | ADDIT. FEE                            | •                      | OR        | ADDIT. FEE                              |                        |
|  |   | (Column 1) CLAIMS   |                                   | (Colu                 |                     | (Column 3)                           | ١.         |                                       |                        |           |   |                        |
| AMENDMENT C                                  |   | REMAINING<br>AFTER<br>AMENDMENT                                 |                                   | NUM<br>PREVI          | BER<br>OUSLY<br>FOR | PRESENT<br>EXTRA                     |            | RATE                                  | ADDI-<br>TIONAL<br>FEE |           | RATE                                    | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus                             | **                    |                     | =                                    |            | X\$ 9=                                |                        | OR        | X\$18=                                  | ;                      |
|  | Independent   | *   | Minus                             | ***                   |                     | =                                    | ]          | X40=                                  |                        | OR        | X80=                                    |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                                   |                       |                     |                                      |            |                                       |                        | Un        |   |                        |
|  | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |                                   |                       |                     |                                      |            |                                       |                        | OR        | +270=                                   |                        |
| **   | If the "Highest Nu<br>"If the "Highest Nu   | imber Previously P<br>imber Previously F<br>imber Previously Pa | aid For" IN TH<br>Paid For" IN TH | IS SPACE              | is less that        | an 20, enter "20<br>an 3, enter "3." | ′          | TOTAL<br>ADDIT. FEE<br>and in the app | propriate bo           | OR        | TOTAL<br>ADDIT. FEE                     |                        |